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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF PENNSYLVANIA, PHILADELPHIA DIVISION	_	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this is an amended filing

# Official Form 101

# Voluntary Petition for Individuals Filing for Bankruptcy

06/22

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1:	Identify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	You	r full name		
	Write the name that is on your government-issued picture identification (for example, your driver's		Kathleen First name	First name
		ise or passport).	N. Middle name	Middle name
	iden	g your picture tification to your meeting the trustee.	Reilly Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years		Kathleen N. Durham	
		ide your married or den names.		
3.	youi num Indiv	the last 4 digits of r Social Security ober or federal vidual Taxpayer tification number	xxx-xx-5777	

Debtor 1 Reilly, Kathleen N. Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years		■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EIN	EIN		
5.	Where you live		If Debtor 2 lives at a different address:		
		853 Beverly Road Jenkintown, PA 19046  Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Montgomery County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)		

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Case number (if known)

Part 2: Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 7. The chapter of the Bankruptcy Code you are 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under ☐ Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ■ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No. bankruptcy within the last Yes. 8 years? **Eastern District of** When 9/16/20 20-13745 District Pennsylvania Case number When District Case number District When Case number 10. Are any bankruptcy cases ■ No pending or being filed by a spouse who is not filing ☐ Yes. this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When District Case number, if known 11. Do you rent your Go to line 12. No. residence? ☐ Yes. Has your landlord obtained an eviction judgment against you? No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it as part of this

Debtor 1

Reilly, Kathleen N.

bankruptcy petition.

Case number (if known)

Part	3: Report About Any Bus	sinesses \	∕ou Own	as a Sole Proprieto	г
12.	Are you a sole proprietor of any full- or part-time business?	■ No.		Part 4.	
		☐ Yes.	Name	and location of busi	ness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			of business, if any	
	If you have more than one sole proprietorship, use a		Numb	oer, Street, City, State	e & ZIP Code
	separate sheet and attach it to this petition.		Chec	k the appropriate box	to describe your business:
				Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))
				None of the above	
13. Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as defined by 11 U.S. C. § 1182(1)?		under Su	bchapter to procee t, and fed	V so that it can set a d under Subchapter \	ourt must know whether you are a small business debtor or a debtor choosing to proceed oppropriate deadlines. If you indicate that you are a small business debtor or you are V, you must attach your most recent balance sheet, statement of operations, cash-flow or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). ter 11.
	For a definition of small business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code	•	<ol> <li>but I am NOT a small business debtor according to the definition in the Bankruptcy</li> </ol>
		☐ Yes.			I1, I am a small business debtor according to the definition in the Bankruptcy Code, and I cer Subchapter V of Chapter 11.
		☐ Yes.			1, I am a debtor according to the definition in § 1182(1) of the Bankruptcy Code, and I subchapter V of Chapter 11.
Part	4: Report if You Own or	Have Any	Hazardo	us Property or Any	Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or		What is	the hazard?	
	safety? Or do you own any property that needs immediate attention?			liate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?		Where is	s the property?	Number, Street, City, State & Zip Code
					Number, Street, City, State & Zip Code

Debtor 1 Reilly, Kathleen N.

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Debtor 1 Reilly, Kathleen N.

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

## **About Debtor 1:**

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Deb	tor 1 Reilly, Kathleen N			Case	e number (if kno	own)	
Part	6: Answer These Question	ons for Repo	orting Purposes				
16.	What kind of debts do you have?		re your debts primarily consundividual primarily for a personal, fa		are defined in	11 U.S.C.§ 101(8) as "incurred by an	
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
			are your debts primarily busines or a business or investment or thro				
			☐ No. Go to line 16c.				
		_	Yes. Go to line 17.				
		16c. S	state the type of debts you owe that	t are not consumer debts or bu	usiness debts		
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter 7. Go	to line 18.			
Do you estimate that after any exempt property is excluded and		☐ Yes. I	am filing under Chapter 7. Do you aid that funds will be available to d			ccluded and administrative expenses are	
	administrative expenses are paid that funds will be		□No				
	available for distribution to unsecured creditors?	С	Yes				
18.	How many Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000		<b>2</b> 5,001-50,000	
	you estimate that you owe?	□ 50-99		☐ 5001-10,000		☐ 50,001-100,000	
		□ 100-199 □ 200-999		☐ 10,001-25,000		☐ More than100,000	
19.	How much do you	□ \$0 - \$50	,000	□ \$1,000,001 - \$10 million		□ \$500,000,001 - \$1 billion	
	estimate your assets to be worth?	\$50,001		□ \$10,000,001 - \$50 millio		□ \$1,000,000,001 - \$10 billion	
			1 - \$500,000 1 - \$1 million	□ \$50,000,001 - \$100 millio□ \$100,000,001 - \$500 mil		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion	
20.	How much do you	□ \$0 - \$50	,000	□ \$1,000,001 - \$10 million		□ \$500,000,001 - \$1 billion	
	estimate your liabilities to be?		- \$100,000	□ \$10,000,001 - \$50 millio		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion	
			1 - \$500,000 1 - \$1 million	□ \$50,000,001 - \$100 millio□ \$100,000,001 - \$500 mil		☐ More than \$50 billion	
Part	7: Sign Below						
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
			osen to file under Chapter 7, I am e. I understand the relief available o			r Chapter 7, 11,12, or 13 of title 11, United I under Chapter 7.	
If no attorney represents me and I did not pay have obtained and read the notice required by				pay or agree to pay someone who is not an attorney to help me fill out this document, I d by 11 U.S.C. § 342(b).			
		I request re	lief in accordance with the chapte	er of title 11, United States Co	de, specified i	n this petition.	
		case can re				y by fraud in connection with a bankruptcy S.C. §§ 152, 1341, 1519, and 3571.	
		Kathleen Signature o	N. Reilly	Signature of	of Debtor 2		
		Executed or	August 26, 2022 MM / DD / YYYY	Executed o	on MM / DD	/YYYY	

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Debtor 1 Reilly, Kathleen N. Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Carol McCullough	Date	August 26, 2022
Signature of Attorney for Debtor		MM / DD / YYYY
Carol McCullough		
Printed name		
McCullough Eisenberg		
Firm name		
65 W Street Rd Ste A-204		
Warminster, PA 18974-3204		
Number, Street, City, State & ZIP Code		
Contact phone	Email address	mccullougheisenberg@gmail.com
56424		
Bar number & State		

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				Doc	cument	Page 8 of 44			
	Fill in this info	ormation to i	dentify your case						
Debto	r 1 <b>K</b>	athleen N.	Pailly						
Debio		st Name		Name		Last Name			
Debto									
(Spouse	e, if filing) Fire	st Name	Middle	Name		Last Name			
United	l States Bankrup	tcy Court for		DISTRI	CT OF PENN	SYLVANIA, PHILADELPHI	Α		
Case	number					_			☐ Check if this is an
									amended filing
_	cial Form		-						42/45
						n asset fits in more than one			12/15
nforma	tion. If more space every question.	e is needed, a	ittach a separate sh	eet to th	nis form. On the	e are filing together, both are e top of any additional pages n or Have an Interest In			
. Do v	ou own or have a	ny legal or eg	uitable interest in a	nv reside	ence. buildina.	land, or similar property?			
		,g		.,	,g,	,			
	o. Go to Part 2. es. Where is the p								
1.1	353 Beverly Ro	d		=	Single-family	<b>y?</b> Check all that apply home Iti-unit building	the amount	of any secured	ims or exemptions. Put d claims on <i>Schedule D:</i>
S	treet address, if availa	able, or other des	cription		•	or cooperative	Creditors W	ho Have Clain	ns Secured by Property.
J	lenkintown	PA	19046-3348			or mobile home	Current val		Current value of the portion you own?
С	ity	State	ZIP Code		Investment pr	operty	\$37	8,725.00	\$378,725.00
				Uho		t in the property? Check one		e simple, tena	our ownership interest ancy by the entireties, or
					Debtor 1 only		Tenancy	by the En	tirety
C	County				Debtor 1 and	Debtor 2 only		if this is com	munity property
				Other		of the debtors and another ou wish to add about this ite on number:	(	,	

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that

someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Debte	or 1 Reilly, Kathleen N	l.	Case number (if known)	
3. <b>C</b> a	rs, vans, trucks, tractors, sp	port utility vehicles, motorcycles		
	No			
<b>.</b>	Yes			
	. 00			
3.1	Make:	Who has an interest in the property? Check one		ured claims or exemptions. Put
	Model:	Debtor 1 only		secured claims on Schedule D: /e Claims Secured by Property.
	Year:	Debtor 2 only	Current value of t	, , ,
	Approximate mileage:	☐ Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	☐ At least one of the debtors and another		
	2015 Nissan Rouge		£40.200	00 640 200 00
	75,000 miles	Check if this is community property (see instructions)	\$10,290	.00 \$10,290.00
3.2	Make:	Who has an interest in the property? Check one	Do not deduct secu	ured claims or exemptions. Put
0.2	Model:	Debtor 1 only		secured claims on Schedule D: /e Claims Secured by Property.
	Year:	Debtor 2 only		
	Approximate mileage:	Debtor 1 and Debtor 2 only	Current value of the continuous c	he Current value of the portion you own?
	Other information:	At least one of the debtors and another	,	
	2010 Toyota Carolla			
	-	☐ Check if this is community property	\$0	.00 \$0.00
		(see instructions)		
		rtion you own for all of your entries from Part 2, including a		\$10,290.00
.yc	ou have attached for Part 2.	Write that number here	=>	Ψ10,230.00 
Part 3	Describe Your Personal and	Household Items		
Do y	ou own or have any legal or	equitable interest in any of the following items?		Current value of the portion you own? Do not deduct secured
6. <b>Ho</b>	usehold goods and furnishi	nas		claims or exemptions.
E		niture, linens, china, kitchenware		
	Yes. Describe			
	vari	ous household goods		\$2,000.00
	ectronics			
E		s; audio, video, stereo, and digital equipment; computers, printers	s, scanners; music collect	tions; electronic devices
_	No	s, cameras, media players, games		
	Yes. Describe			
ч	res. Describe			
	Ilectibles of value camples: Antiques and figurine collections, memora	es; paintings, prints, or other artwork; books, pictures, or other art abilia, collectibles	objects; stamp, coin, or b	paseball card collections; other
	No			
_	Yes. Describe			
		hin.		
E>	instruments	bies , exercise, and other hobby equipment; bicycles, pool tables, golf	clubs, skis; canoes and k	ayaks; carpentry tools; musical
	No			

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Official Form 106A/B Schedule A/B: Property page 3

De	ebtor 1	Reilly, Kathleen N.		Case number (if known)	
18.		mutual funds, or publicly traded stocks les: Bond funds, investment accounts with b			
	■ No □ Yes	Institution or issu	uer name:		
19.	Non-pul	•	rporated and unincorporated businesses	, including an interest in a	n LLC, partnership, and
	■ No	S.N.W. C			
	☐ Yes.	Give specific information about them  Name of entity:		% of ownership:	
20.	Negotia	able instruments include personal checks, ca	gotiable and non-negotiable instruments ashiers' checks, promissory notes, and mone ransfer to someone by signing or delivering the	ey orders.	
		Give specific information about them Issuer name:			
21.		nent or pension accounts les: Interests in IRA, ERISA, Keogh, 401(k)	), 403(b), thrift savings accounts, or other p	ension or profit-sharing plan	s
	☐ Yes. L	List each account separately.  Type of account:	Institution name:		
22.	Your sh		so that you may continue service or use from t, public utilities (electric, gas, water), telecon		others
			Institution name or individual:		
23.	Annuitie No	es (A contract for a periodic payment of mon	ney to you, either for life or for a number of ye	ears)	
	☐ Yes	Issuer name and description	1.		
24.		s in an education IRA, in an account in a C. §§ 530(b)(1), 529A(b), and 529(b)(1).	qualified ABLE program, or under a qua	lified state tuition program	
	☐ Yes	Institution name and descript	tion. Separately file the records of any interes	sts.11 U.S.C. § 521(c):	
25.	■ No		(other than anything listed in line 1), and	d rights or powers exercisa	ble for your benefit
	☐ Yes.	Give specific information about them			
26.		<ul> <li>copyrights, trademarks, trade secrets, a les: Internet domain names, websites, proce</li> </ul>	and other intellectual property eeds from royalties and licensing agreements	<b>;</b>	
	☐ Yes.	Give specific information about them			
27.		es, franchises, and other general intangik les: Building permits, exclusive licenses, cod	bles operative association holdings, liquor license	s, professional licenses	
	■ Yes.	Give specific information about them	4.11		¢0.00
		PA Real Estat	<u>te License</u>		\$0.00
M	oney or p	property owed to you?			Current value of the portion you own?  Do not deduct secured claims or exemptions.
28.	Tax refu ■ No	unds owed to you			
	_	Give specific information about them, including	ing whether you already filed the returns and	the tax years	

Official Form 106A/B Schedule A/B: Property

Filed 08/26/22 Entered 08/26/22 10:26:22 Case 22-12238-mdc Doc 1 Document Page 12 of 44 Debtor 1 Case number (if known) Reilly, Kathleen N. 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No  $\square$  Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ■ No ☐ Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for \$1,100.84 Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47.

53. Do you have other property of any kind you did not already list?

Describe All Property You Own or Have an Interest in That You Did Not List Above

Examples: Season tickets, country club membership

■ No

Part 7:

☐ Yes. Give specific information.......

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Debtor 1 Case number (if known) Reilly, Kathleen N. 54. Add the dollar value of all of your entries from Part 7. Write that number here ..... \$0.00 Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 \$378,725.00 Part 2: Total vehicles, line 5 56. \$10,290.00 57. Part 3: Total personal and household items, line 15 \$3,400.00 Part 4: Total financial assets, line 36 \$1,100.84 59. Part 5: Total business-related property, line 45 \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 61. \$0.00 Copy personal property total Total personal property. Add lines 56 through 61... 62. \$14,790.84 \$14,790.84 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$393,515.84

Official Form 106A/B Schedule A/B: Property page 6

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Fill in th	is information to identif	y your case:			
Debtor 1	Kathleen N. Reill	у			
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
	ankruptcy Court for the:	EASTERN DISTRICT O DIVISION	F PENNSYLVANIA, PHILAI	DELPHIA	
Case number (if known)					Check if this is an amended filing

# Official Form 106C

# Schedule C: The Property You Claim as Exempt

4/22

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
853 Beverly Rd	\$378,725.00		\$273,034.15	11 USC § 522(b)(3)(B)
Jenkintown PA, 19046-3348 Line from Schedule A/B 1.1			100% of fair market value, up to any applicable statutory limit	
various household goods Line from Schedule A/B 6.1	\$2,000.00		\$2,000.00	11 USC § 522(b)(3)(B)
Ellie Holli Schedule Av.D. G. 1			100% of fair market value, up to any applicable statutory limit	
various jewelry Line from Schedule A/B 12.1	\$1,000.00		\$1,000.00	11 USC § 522(b)(3)(B)
Ellie Holli Gonedale AVE 12.1			100% of fair market value, up to any applicable statutory limit	
1 Dog & 1 cat Line from Schedule A/B 13.1	\$100.00		\$100.00	11 USC § 522(b)(3)(B)
Line Holli Schedule A/B. 13.1			100% of fair market value, up to any applicable statutory limit	
Key Bank checking	\$1,080.84	•	\$0.00	42 Pa.C.S. § 8123(a)
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	

De	btor 1	Reilly, Kathleen N.	Case number (if known)
3.	•	e you claiming a homestead exemption of more than \$189,050?  ubject to adjustment on 4/01/25 and every 3 years after that for cases filed on or after the	ne date of adjustment.)
		No	
		Yes. Did you acquire the property covered by the exemption within 1,215 days before	you filed this case?
		□ No	
		☐ Yes	

Official Form 106C

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		Document Page 1	0 01 44			
Fill in this inf	formation to ident	ify your case:				
Debtor 1	Kathleen N. Rei	llv				
_ ·	rirst Name	Middle Name Last Name		}		
Debtor 2						
(Spouse if, filing)	irst Name	Middle Name Last Name				
		EASTERN DISTRICT OF PENNSYLVANIA	, PHILADELPHIA			
United States Bankru	ptcy Court for the:	DIVISION				
Case number						
(if known)				☐ Check	if this is an	
				amend	led filing	
O(() : 1   E   4	000					
Official Form 1	-					
Schedule D:	Creditors	Who Have Claims Secure	ed by Property	y	12/15	
Re as complete and acc	urate as nossible. If	two married people are filing together, both are e	qually responsible for sun	nlying correct informati	on If more snace is	
		number the entries, and attach it to this form. On				
known).						
1. Do any creditors have	e claims secured by	your property?				
☐ No. Check this	box and submit thi	s form to the court with your other schedules. Yo	u have nothing else to rep	oort on this form.		
Yes. Fill in all o	of the information be	elow.				
Part 1: List All Se	cured Claims					
		nore than one secured claim, list the creditor separatel	Column A	Column B	Column C	
		a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured	
much as possible, list the	e claims in alphabetic	al order according to the creditor 's name.	Do not deduct the	that supports this	portion	
2.1 Abington Tov	wnshin	Describe the property that secures the claim:	value of collateral. \$119.50	s378,725.00	If any <b>\$0.00</b>	
Creditor's Name	wiisiiip	853 Beverly Rd, Jenkintown, PA	Ψ113.30	ψ370,723.00	Ψ0.00	
		19046-3348				
		As of the data was file the alaim is 20 to 100				
1176 Old Yor	k Rd	As of the date you file, the claim is: Check all that apply.				
Abington, PA	19001-3713	Contingent				
Number, Street, City,	State & Zip Code	☐ Unliquidated				
		☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
Debtor 1 only		An agreement you made (such as mortgage or s	ecured			
Debtor 2 only		car loan)				
Debtor 1 and Debtor	,	Statutory lien (such as tax lien, mechanic's lien)				
At least one of the de	ebtors and another	☐ Judgment lien from a lawsuit				
Check if this claim	relates to a	Other (including a right to offset)				
community debt						
Date debt was incurred	i	Last 4 digits of account number 4270	)			
2.2 Abington Tov	wnship	Describe the property that secures the claim:	\$3,374.85	\$378,725.00	\$0.00	
Creditor's Name		853 Beverly Rd, Jenkintown, PA				
		19046-3348				
4470 01 1 1/4		As of the date you file, the claim is: Check all that				
1176 Old Yor		apply.				
Abington, PA		Contingent				
Number, Street, City,	, State & ZIP Code	☐ Unliquidated ☐ Disputed				
Who owes the debt?	Check one	Nature of lien. Check all that apply.				
Debtor 1 only	onour ono.	☐ An agreement you made (such as mortgage or s	ecured			
Debtor 2 only		car loan)	courcu			
Debtor 1 and Debtor	2 only	Statutory lien (such as tax lien, mechanic's lien)				
At least one of the de	•	☐ Judgment lien from a lawsuit				
Check if this claim		Other (including a right to offset)				
community debt	. J. 4.00 to 4	care (including a right to onset)			_	
Data dalata da la da		Land Authorities of a constraint of the constrai				
Date debt was incurred	1	Last 4 digits of account number 6823	5			

Debtor 1 Kathleen N. Reilly	(	Case number (f known)		
	lle Name Last Name			
Capital One Auto				
Finance	Describe the property that secures the claim:	\$14,086.82	\$10,290.00	\$3,796.82
Creditor's Name	2015 Nissan Rouge 75,000 miles			
	_			
PO Box 60511	As of the date you file, the claim is: Check all that			
City of Industry, CA	apply.			
91716-0511	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another				
Check if this claim relates to a	Other (including a right to offset)			
community debt	Other (including a right to offset)			
<b>,</b>				
Date debt was incurred	Last 4 digits of account number 4532			
2.4 Internal Revenue Service	Describe the property that secures the claim:	\$22,869.89	\$378,725.00	\$0.00
Creditor's Name	853 Beverly Rd, Jenkintown, PA			
	19046-3348			
600 Arch St	As of the date you file, the claim is: Check all that			
Philadelphia, PA	apply.			
19106-1611	_ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	■ Statutory lien (such as tax lien, mechanic's lien)			
_				
At least one of the debtors and another	· _			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
community debt				
Date debt was incurred	Last 4 digits of account number 0986			
	<del></del>			
2.5 Internal Revenue Service	Describe the property that secures the claim:	\$27,895.07	\$378,725.00	\$0.00
Creditor's Name	853 Beverly Rd, Jenkintown, PA			
	19046-3348			
600 Arch St	As of the date you file, the claim is: Check all that			
Philadelphia, PA	apply.			
19106-1611	Contingent			
Number, Street, City, State & Zip Code	Unliquidated			
	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or sec	cured		
Debtor 2 only	car loan)			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	—			
	,			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			-
Johnnamy Gebt				
Date debt was incurred	Last 4 digits of account number 0989			

Debtor 1	Kathleen N. Reilly	Case	e number (f known)		
	First Name Middle N	ame Last Name			
2.6 Int	ernal Revenue Service	Describe the property that secures the claim:	\$26,782.59	\$378,725.00	\$0.00
	litor's Name	853 Beverly Rd, Jenkintown, PA 19046-3348	<del></del>		<del></del>
600	0 Arch St				
	iladelphia, PA	As of the date you file, the claim is: Check all that apply.			
	106-1611	Contingent			
Num	ber, Street, City, State & Zip Code	Unliquidated			
Who owe	es the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
☐ Debtor		☐ An agreement you made (such as mortgage or secured	1		
☐ Debtor		car loan)	-		
☐ Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At leas	at one of the debtors and another	☐ Judgment lien from a lawsuit			
	if this claim relates to a nunity debt	Other (including a right to offset)			
Date debt	was incurred	Last 4 digits of account number 0946			
Ma	entagmany County Tax				
	ontgomery County Tax aim Bureau	Describe the property that secures the claim:	\$7,221.32	\$378,725.00	\$0.00
	ditor's Name	853 Beverly Rd, Jenkintown, PA 19046-3348			
	Nontgomery Plz Ste	As of the date you file, the claim is: Check all that			
600 No		apply.			
194	rristown, PA 401-4851	☐ Contingent			
Num	ber, Street, City, State & Zip Code	☐ Unliquidated			
Who owe	es the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
☐ Debtor		☐ An agreement you made (such as mortgage or secured	1		
☐ Debtor		car loan)	•		
☐ Debtor	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At leas	at one of the debtors and another	☐ Judgment lien from a lawsuit			
	if this claim relates to a nunity debt	Other (including a right to offset)			
Date debt	was incurred	Last 4 digits of account number 2236			
	entgomery County Tax		<b>AT</b> 450.05	****	
L Cla	aim Bureau	Describe the property that secures the claim:	\$7,452.05	\$378,725.00	\$0.00
	litor's Name	853 Beverly Rd, Jenkintown, PA 19046-3348			
_	Box 190	As of the date you file, the claim is: Check all that			
	rristown, PA 404-0190	apply.			
	ber, Street, City, State & Zip Code	☐ Contingent ☐ Unliquidated			
140111	, 2.1001, 0.17, 0.1010 W Zip 0000	☐ Disputed			
Who owe	es the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor	1 only	☐ An agreement you made (such as mortgage or secured	d		
Debtor	•	car loan)			
	1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_	et one of the debtors and another	☐ Judgment lien from a lawsuit			
	if this claim relates to a nunity debt	Other (including a right to offset)			
Date debt	was incurred	Last 4 digits of account number 0560			

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Debtor 1 Kathleen N. Reilly		Case number (f known)		
First Name Middle N	Jame Last Name			
2.9 Montgomery Tax Claim Bureau	Describe the property that secures the claim:	\$7,436.63	\$378,725.00	\$0.00
Creditor's Name	853 Beverly Rd, Jenkintown, PA 19046-3348			
1 Montgomery PIz Ste 600 Norristown, PA 19401-4851	As of the date you file, the claim is: Check all that apply.  Contingent	l		
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or s car loan)	secured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number 9617	7		
Add the dollar value of your entries in Co	lumn A on this page. Write that number here:	\$117,238.7	· <u>2</u>	
If this is the last page of your form, add the Write that number here:	ne dollar value totals from all pages.	\$117,238.7	<del></del>	

## Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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		Docum	ent Page	20 of 4	44		
Fill in this in	formation to identify you	r case:					
Debtor 1	Kathleen N. Reilly	1					
20010.	First Name	Middle Name	Last Nam	е			
Debtor 2	E: AN					TI.	
(Spouse if, filing)	First Name	Middle Name	Last Nam	9			
United States B	ankruptcy Court for the:	EASTERN DISTRICT DIVISION	OF PENNSYLVAN	IIA, PHILA	ADELPHIA	i i	
Case number					ſ		
(if known)						_	if this is an ded filing
Official For	m 106E/F						
	E/F: Creditors W	ho Have Unsec	cured Claim	s			12/15
Schedule G: Exec D: Creditors Who he Continuation I ase number (if ki	•	red Leases (Official Form operty. If more space is n e no information to repor	106G). Do not inclueeded, copy the Par	de any cre you need	editors with partially se I, fill it out, number the	ecured claims that a e entries in the boxes	re listed in Schedule s on the left. Attach
	All of Your PRIORITY Uns						
	tors have priority unsecured	l claims against you?					
☐ No. Go to	Part 2.						
Yes.							
identify what to possible, list to	ur priority unsecured claims ype of claim it is. If a claim ha he claims in alphabetical orde n one creditor holds a particula	s both priority and nonprior r according to the creditor 's	ity amounts, list that on the same. If you have m	laim here a	and show both priority ar	nd nonpriority amount	s. As much as
	nation of each type of claim, s			booklet.)			
				ŕ	Total claim	Priority amount	Nonpriority amount
	al Revenue Service	Last 4 digits	of account number	1559	\$2,538.95	\$2,538.95	\$0.00
Priority C	reditor's Name	When was th	e debt incurred?				
600 Ar Philad	ch St elphia, PA 19106-161	1				-	
	Street City State Zip Code		e you file, the claim	is: Check	all that apply		
Who incurre	ed the debt? Check one.	☐ Continger	nt				
Debtor 1	only	☐ Unliquidat	red				
Debtor 2	only	☐ Disputed					
Debtor 1	and Debtor 2 only	Type of PRIC	ORITY unsecured cla	im:			
At least of	one of the debtors and anothe	Domestic	support obligations				
☐ Check if	this claim is for a commun	ity debt Taxes and	d certain other debts y	ou owe the	e government		
	subject to offset?	_	death or personal inj		· ·		
■ No	·	☐ Other. Sp	ecify				
Πyes			· ———				•

Deb	tor 1 Reilly, Kathleen N.		Case nu	ımber (if known)		
2.2	Pennsylvania Department of Revenue	Last 4 digits of account number	3944	\$15,531.29	\$15,531.29	\$0.00
	Priority Creditor's Name	When was the debt incurred?				
	PO Box 280946			_		
	Harrisburg, PA 17128-0946  Number Street City State Zip Code	As of the date you file, the claim	ie. Chack all	that apply		
	Who incurred the debt? Check one.	Contingent	is. Check all	шат арріу		
	☐ Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	- 1				
	Debtor 1 and Debtor 2 only	☐ Disputed  Type of PRIORITY unsecured cla	im:			
	<u> </u>	Domestic support obligations				
	At least one of the debtors and another	_				
	☐ Check if this claim is for a community debt Is the claim subject to offset?	<ul><li>■ Taxes and certain other debts y</li><li>□ Claims for death or personal inju</li></ul>	_			
	No	<u> </u>	-			
	Yes	Uther. Specify				
2.3	Pennsylvania Department of Revenue	Last 4 digits of account number	1140	\$1,248.12	\$1,248.12	\$0.00
	Priority Creditor's Name	When was the debt incurred?				
	1 Revenue PI	When was the dept incurred:				
	Harrisburg, PA 17129-0001					
	Number Street City State Zip Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all	that apply		
	Debtor 1 only	Contingent				
	Debtor 2 only	☐ Unliquidated				
	_	Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	_			
	Is the claim subject to offset?	Claims for death or personal inju	-			
	■ No □ Yes	Other. Specify				
	□ Yes					
2.4	Pennsylvania Department of Revenue	Last 4 digits of account number	1236	\$2,189.88	\$2,189.88	\$0.00
	Priority Creditor's Name	When was the debt incurred?				
	PO Box 280946 Harrisburg, PA 17128-0946					
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all	that apply		
	Who incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	☐ Debtor 2 only	☐ Disputed				
	☐ Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	im:			
	At least one of the debtors and another	☐ Domestic support obligations				
	☐ Check if this claim is for a community debt	Taxes and certain other debts y	ou owe the g	overnment		
	Is the claim subject to offset?	Claims for death or personal inju	ury while you	were intoxicated		
	No	Other. Specify				
	Yes					

Part 2: List All of Your NONPRIORITY Unsecured Claims

Debto	Reilly, Kathleen N.	Case number (f known)	
3. Do	any creditors have nonpriority unsecured claims	s against you?	
	No. You have nothing to report in this part. Submit t	his form to the court with your other schedules	
		is in sour in your one solication	
-	Yes.		
uns	secured claim, list the creditor separately for each cla	alphabetical order of the creditor who holds each claim. If a creditor has more than aim. For each claim listed, identify what type of claim it is. Do not list claims already included creditors in Part 3.If you have more than three nonpriority unsecured claims fill out the	luded in Part 1. If more
			Total claim
4.1	Abington Gynecologists	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name	<del></del>	Ψ1,000.00
		When was the debt incurred?	_
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Dobligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify	-
4.2	Abington Hospital	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name	When was the debt incurred?	
	1200 Old York Rd Abington, PA 19001-3720	When was the dest incurred:	-
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt	Obligations arising out of a separation agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	
	■ No	Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other Specify	

Other. Specify

Debtor	1 Reilly, Kathleen N.		Case n	umber (if known)	
4.3	Capital One Bank	Last 4 digits of account number	9044	<u> </u>	\$1,053.59
	Nonpriority Creditor's Name	When was the debt incurred?			
	PO Box 71083 Charlotte, NC 28272-1083 Number Street City State Zip Code	As of the date you file, the claim	is: Check	k all that anniv	-
	Who incurred the debt? Check one.	As of the date you me, the claim	13. 011001	tall that apply	
	■ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt	Obligations arising out of a sep	aration ac	greement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a. a o a.g		
	■ No	Debts to pension or profit-shari	ng plans,	and other similar debts	
	Yes	Other. Specify credit card	l last u	sed in 2019	-
4.4	First premier bank	Last 4 digits of account number	6722	)	\$762.01
	Nonpriority Creditor's Name		<u> </u>	<u> </u>	<u> </u>
	DO D. 5500	When was the debt incurred?			_
	PO Box 5529 Sioux Falls, SD 57117-5529				
	Number Street City State Zip Code	As of the date you file, the claim	is: Check	k all that apply	
	Who incurred the debt? Check one.				
	Debtor 1 only	☐ Contingent			
	Debtor 2 only	Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a sep report as priority claims	aration ag	greement or divorce that you did not	
	■ No	Debts to pension or profit-shari	ng plans,	and other similar debts	
	Yes	Other. Specify credit card	last u	sed in 2019	_
Part 3:	List Others to Be Notified About a De	bt That You Already Listed			
is tryi have	is page only if you have others to be notified ng to collect from you for a debt you owe to s more than one creditor for any of the debts the ed for any debts in Parts 1 or 2, do not fill out	omeone else, list the original creditor in at you listed in Parts 1 or 2, list the add	Parts 1	or 2, then list the collection agency	here. Similarly, if you
Part 4:	Add the Amounts for Each Type of U	nsecured Claim			
	the amounts of certain types of unsecured cl of unsecured claim.	aims. This information is for statistical i	eporting	purposes only. 28 U.S.C. §159. Add	d the amounts for each
				Total Claim	
	6a. Domestic support obligation	ıs	6a.	\$0.00	
Total cl		ts you owe the government	6b.	\$ 21,508.24	
		I injury while you were intoxicated	6c.	\$ 0.00	_
	·	nsecured claims. Write that amount here.	6d.	\$ 0.00	_
	6e. Total Priority. Add lines 6a th	rough 6d.	6e.	\$ 21,508.24	_
				Total Claim	
	6f. Student loans		6f.	Total Claim  \$	_
Total cl		separation agreement or divorce that			
	you did not report as priorit	y claims	6g.	\$ 0.00	_
	6h. Debts to pension or profit-s	haring plans, and other similar debts	6h.	\$ 0.00	

0.00

Debtor 1 Reilly, Kathleen N. Case number (f known)

6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

Total Nonpriority. Add lines 6f through 6i. 6j. \$ 3,815.60

Official Form 106 E/F Schedule E/F: Creditors Who Have Unsecured Claims

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				-
Fill in th	nis information to identi	y your case:		
Debtor 1	Kathleen N. Reill	y		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		EASTERN DISTRICT O	F PENNSYLVANIA, PHILAD	DELPHIA
Case number (if known)				

## Official Form 106G

# Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person o	r company with Name, Number	whom you have the , Street, City, State and ZIP	e contract or lease Code	State what the contract or lease is for
2.1					
	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.2	Name				<u> </u>
	Number:	Chroat			<u> </u>
	Number	Street			<u></u>
	City		State	ZIP Code	
2.3					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
2.4	O.I.,		Ciaio	2 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			_
	City		State	ZIP Code	<del>_</del>
	.,				

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			Docume	nt Page 26 01 44	
	Fill in this	information to identif	y your case:		
Debtor 1		Kathleen N. Reilly			
JODIOI I		First Name	Middle Name	Last Name	- \
Debtor 2	)				
Spouse if,		First Name	Middle Name	Last Name	-
			EACTEDNI DICTRICT O		
Jnited S	States Bank	cruptcy Court for the:	DIVISION	F PENNSYLVANIA, PHILADELPHIA	_
2000 0111	mh o r				
Case nui (if known)	mber				☐ Check if this is an
,					amended filing
)ffici	al Fori	m 106H			
			obtoro		4045
scne	aule i	H: Your Code	eptors		12/15
,odoptoi	re are neo	nle or entities who are	a also liable for any debts	s you may have. Be as complete and ac	curate as possible. If two married people
					ed, copy the Additional Page, fill it out,
					y Additional Pages, write your name and
ase nun	nber (if kn	own). Answer every q	uestion.		
1 D	o vou bav	e any codebtors? (If y	ou are filing a joint case, do	not list either spouse as a codebtor.	
1. D	o you nav	e any codebiors? (ii y	ou are ming a joint case, uc	o not list either spouse as a codebtor.	
□N	lo				
■ Y	es				
					operty states and territories include Arizona,
Calif	tornia, idar	no, Louisiana, Nevada,	New Mexico, Puerto Rico,	Texas, Washington, and Wisconsin.)	
■ N	lo. Go to lir	20.2			
			o or local continuont line wi	ith way at the time?	
<b>Ц</b> 1	es. Dia you	ir spouse, rormer spous	se, or legal equivalent live w	in you at the time?	
					filing with you. List the person shown in
					the creditor on Schedule D (Official Form
	u), Scheal umn 2.	lie E/F (Official Form	106E/F), or Schedule G (C	Official Form 106G). Use Schedule D, Sc	nedule E/F, or Schedule G to fill out
Con	ullill 2.				
		1: Your codebtor			ne creditor to whom you owe the debt
	Name, Num	nber, Street, City, State and ZI	P Code	Check all scl	nedules that apply:
3.1	Chris D	Ourham		Sobodul	e D, line <b>2.1</b>
• • • • • • • • • • • • • • • • • • • •	00	- ai iiaiii			
					e E/F, line
				☐ Schedule	
				Abington 1	lownship
3.2	Chris F	Durham			- D. P
0.2	Cillis	Juliani			e D, line <b>2.2</b>
					e E/F, line
				☐ Schedule	
				Abington 1	Township
3.3	Chris D	Durham		■ Schodul	e D, line <b>2.4</b>
	J D	·			
					e E/F, line
				☐ Schedule	
				Internal Re	evenue Service

Case number (if known)

	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.4	Chris Durham	■ Schedule D, line <b>2.5</b>
		☐ Schedule E/F, line
		☐ Schedule G
		Internal Revenue Service
3.5	Chris Durham	■ Schedule D, line 2.6
		☐ Schedule E/F, line
		☐ Schedule G
		Internal Revenue Service
3.6	Chris Durham	☐ Schedule D, line
5.0	Cinis Durnam	■ Schedule E/F, line
		□ Schedule G
		Internal Revenue Service
3.7	Chris Durham	
5.7	Chris Durnam	Schedule D, line 2.7
		☐ Schedule E/F, line
		☐ Schedule G Montgomery County Tax Claim Bureau
	Ohnia Dumham	_
3.8	Chris Durham	Schedule D, line 2.8
		☐ Schedule E/F, line ☐ Schedule G
		Montgomery County Tax Claim Bureau
3.9	Chuis Duuham	
J.9	Chris Durham	Schedule D, line 2.9
		☐ Schedule E/F, line ☐ Schedule G
		Montgomery Tax Claim Bureau
2 10	Chris Durham	□ Sahadula D. lina
J. 1U	Chris Durham	☐ Schedule D, line
		■ Schedule E/F, line <b>2.2</b> □ Schedule G
		Pennsylvania Department of Revenue
3.11	Chris Durham	☐ Schedule D, line
,, i i	Omis Burnam	■ Schedule E/F, line 2.3
		□ Schedule G
		Pennsylvania Department of Revenue

Debtor 1 Reilly, Kathleen N.

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Debtor 1	Reilly, Kathleen N.	Case number (if known)
	Additional Page to List More Codebtors	
	Column 1: Your codebtor	Column 2: The creditor to whom you owe the debt Check all schedules that apply:
3.12	Chris Durham	☐ Schedule D, line
		■ Schedule E/F, line 2.4
		☐ Schedule G
		Pennsylvania Department of Revenue

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Fill	in this information to identify your cas	se:								
Deb	otor 1 Kathleen N. I	Reilly								
	otor 2				_					
Uni	ted States Bankruptcy Court for the:	EASTERN DISTRICT PHILADELPHIA DIVIS		Α,						
	e number own)		-				mended ppleme	nt showing	g postpetition wing date:	chapter 13
<u>O</u>	ficial Form 106I					MM	/ DD/ Y	YYY		
S	chedule I: Your Inco	me								12/1
spoi atta	blying correct information. If you a use. If you are separated and your ch a separate sheet to this form. Of the Describe Employment  Fill in your employment information.	spouse is not filing wit	h you, do not inclu	de informa	ation a	about you se numbe	r spous r (if kno	se. If mor own). Ans	e space is ne	eded,
	If you have more than one job,		■ Employed				☐ Employed			
	attach a separate page with information about additional employers.	Employment status	☐ Not employed				☐ Not employed			
	Include part-time, seasonal, or self-employed work.	Occupation Employer's name	NRT Philadelp	hia						
	Occupation may include student or homemaker, if it applies.	Employer's address	175 Park Ave Madison, NJ 0	7940-112	23					
		How long employed th	nere? 2 year	's			_			
Par	t 2: Give Details About Mont	hly Income								
	mate monthly income as of the dat so you are separated.	e you file this form. If y	ou have nothing to re	eport for an	y line, v	write \$0 in	the spa	ce. Includ	le your non-fili	ng spouse
	u or your non-filing spouse have more e, attach a separate sheet to this form		bine the information f	or all emplo	oyers fo	or that pers	son on t	he lines b	elow. If you ne	eed more
					F	or Debto	r 1		btor 2 or ing spouse	
2.	List monthly gross wages, salary deductions). If not paid monthly, ca			2.	\$_	10,44	6.69	\$	N/A	-
3.	Estimate and list monthly overting	ne pay.		3.	+\$_		0.00	+\$	N/A	-
4.	Calculate gross Income. Add line	2 + line 3.		4.	\$_	10,446.	69_	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

Debtor 1	Reilly, Kathleen N.	_	Case	number (if known)		
			For	Debtor 1	For Debtor	
C	opy line 4 here	4.	\$_	10,446.69	\$	N/A
5. <b>Li</b>	st all payroll deductions:					
5a	a. Tax, Medicare, and Social Security deductions	5a.	\$	2,377.56	\$	N/A
5k	•	5b.	<u> </u>	0.00	\$	N/A
50	Voluntary contributions for retirement plans	5c.	\$_	208.33	\$	N/A
50	d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	N/A
56	e. Insurance	5e.	\$	470.80	\$	N/A
5f	5	5f.	\$	0.00	\$	N/A
50		5g.	\$	0.00	\$	N/A
5h		5h.+	\$_		+ \$	N/A
	Pa sui	_	\$_	6.26	\$	N/A
6. <b>A</b>	dd the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	3,067.28	\$	N/A
7. <b>C</b>	alculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	7,379.41	\$	N/A
8. <b>Li</b> 8a	st all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	N/A
8k	•	8b.	<u>\$</u> —	0.00	\$	N/A
80	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	N/A
80		8d.	<u>\$</u> —	0.00	\$	N/A
86		8e.	<u> </u>	0.00	\$	N/A
8f	•	8f.	\$	0.00	\$	N/A
80	g. Pension or retirement income	8g.	\$	0.00	\$	N/A
81	n. Other monthly income. Specify: Child support	8h.+	\$	592.00	+ \$	N/A
9. <b>A</b>	dd all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	592.00	\$	N/A
	alculate monthly income. Add line 7 + line 9.  dd the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$	•	7,971.41 + \$_	N/A	= \$
In ot De	tate all other regular contributions to the expenses that you list in Schedule clude contributions from an unmarried partner, members of your household, your definer friends or relatives.  To not include any amounts already included in lines 2-10 or amounts that are not available:	ependent		·		+\$0.00
	dd the amount in the last column of line 10 to the amount in line 11. The resurrite that amount on the Summary of Schedules and Statistical Summary of Certain					\$ 7,971.41
13 <b>D</b> .	o you expect an increase or decrease within the year after you file this form?	2				Combined monthly income
13. D	No.	·				

Fill	in this information to identify your case:				
Deb	otor 1 Kathleen N. Reilly		Che	ck if this is:	
Deb	otor 2			An amended filing A supplement show	ing postpetition chapter 13
(Sp	ouse, if filing)		_	expenses as of the	
Uni	ted States Bankruptcy Court for the: EASTERN DISTRICT OF PENNS PHILADELPHIA DIVISION	YLVANIA,	-	MM / DD / YYYY	
	se numberknown)				
	fficial Form 106J				
	chedule J: Your Expenses				12/1
info (if I	as complete and accurate as possible. If two married people are ormation. If more space is needed, attach another sheet to this follown). Answer every question.  It 1:  Describe Your Household				
1.	Is this a joint case?				
	■ No. Go to line 2. □ Yes. <b>Does Debtor 2 live in a separate household?</b>				
	☐ No☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses	for Separate Householdol	Debto	r 2.	
2.	Do you have dependents? ☐ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relationsh Debtor 1 or Debtor 2	ip to	Dependent's age	Does dependent live with you?
	Do not state the dependents names.	Daughter		18	□ No ■ Yes
		Daughter		22	□ No ■ Yes
		Son			□ No ■ Yes □ No
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				☐ Yes
Est	Estimate Your Ongoing Monthly Expenses timate your expenses as of your bankruptcy filing date unless your benses as of a date after the bankruptcy is filed. If this is a supple plicable date.				
val	clude expenses paid for with non-cash government assistance if lue of such assistance and have included it on Schedule I: Your lificial Form 106I.)			Your exp	enses
4.	The rental or home ownership expenses for your residence. In payments and any rent for the ground or lot.	clude first mortgage	4. \$	S	0.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$	S	667.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		120.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		200.00
	4d. Homeowner's association or condominium dues		4d. \$	S	0.00
5.	Additional mortgage payments for your residence, such as hon	ne equity loans	5. \$	·	0.00

Debtor 1	Reilly, Ka	athleen N.	Case num	ber (if known)	
6. <b>Util</b>	ities:				
6. <b>6</b> 1.		heat, natural gas	6a.	\$	300.00
6b.	•	ver, garbage collection	6b.	\$	100.00
6c.		, cell phone, Internet, satellite, and cable services	6c.	\$	
6d.	•	•		·	240.00
	Other. Spe	•	6d.	\$	363.00
		keeping supplies	7.	\$	1,400.00
		nildren's education costs	8.	\$	0.00
	•	y, and dry cleaning	9.	\$	250.00
10. <b>Per</b>	sonal care pr	oducts and services	10.	\$	0.00
11. <b>Me</b>	dical and den	tal expenses	11.	\$	150.00
		Include gas, maintenance, bus or train fare.	40	Φ.	400.00
	not include ca	. ,	12.	\$	
		lubs, recreation, newspapers, magazines, and boo		\$	150.00
		ibutions and religious donations	14.	\$	0.00
15. <b>Ins</b> ı					
		surance deducted from your pay or included in lines 4		Ф	0.00
	. Life insurar		15a.		0.00
	. Health insu		15b.	·	0.00
	. Vehicle ins		15c.	·	272.00
	I. Other insur	· · · · · · · · · · · · · · · · · · ·	15d.	\$	0.00
		lude taxes deducted from your pay or included in lines			
Spe	ecify:		16.	\$	0.00
		ase payments:			
		nts for Vehicle 1	17a.	·	0.00
17b	<ol> <li>Car payme</li> </ol>	nts for Vehicle 2	17b.	\$	0.00
17c	. Other. Spe	cify:	17c.	\$	0.00
17d	<ol> <li>Other. Spe</li> </ol>	cify:	17d.	\$	0.00
8. <b>Yo</b> u	ur payments	of alimony, maintenance, and support that you did	not report as		0.00
		our pay on line 5, Schedule I, Your Income (Officia		\$	0.00
9. <b>Oth</b>	er payments	you make to support others who do not live with	you.	\$	0.00
	ecify:		19.		
		rty expenses not included in lines 4 or 5 of this fo			
		on other property	20a.		0.00
20b	<ol> <li>Real estate</li> </ol>	taxes	20b.		0.00
20c	. Property, h	omeowner's, or renter's insurance	20c.	\$	0.00
20d	<ol> <li>Maintenand</li> </ol>	ce, repair, and upkeep expenses	20d.	\$	0.00
20e	. Homeowne	r's association or condominium dues	20e.	\$	0.00
1. Oth	er: Specify:	Personal grooming	21.	+\$	150.00
do	g care			+\$	50.00
		nonthly expenses			
	a. Add lines 4			\$	4,812.00
22b	. Copy line 22	(monthly expenses for Debtor 2), if any, from Officia	Form 106J-2	\$	
22c	. Add line 22a	and 22b. The result is your monthly expenses.		\$	4,812.00
					,
	-	nonthly net income.	00	Φ.	70-111
		2 (your combined monthly income) from Schedule I.	23a.		7,971.41
23b	. Copy your	monthly expenses from line 22c above.	23b.	-\$	4,812.00
220	- Cubtroot :	uir monthly ovnonces from your monthly income			
23C		our monthly expenses from your monthly income. s your <i>monthly net income</i> .	23c.	\$	3,159.41
	THE TESUIL	s your monuny neumbonne.	200.	<u>.                                    </u>	-,
24. <b>Do</b>	vou expect a	n increase or decrease in your expenses within th	e vear after vou file this f	orm?	
		u expect to finish paying for your car loan within the year or o			e or decrease because of a
		erms of your mortgage?		-	
	No.				
	Yes.	Explain here:			

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Debtor 1	Kathleen N. Reill	у		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	F PENNSYLVANIA, PHILADELPHIA	
Case number (if known)				☐ Check if this is a amended filing

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

12/15

	Sign Below							
Die	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	l No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice  Declaration, and Signature (Official Form 11						
	Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.							
Х	, or remainded the remaining	X						
	Kathleen N. Reilly Signature of Debtor 1	Signature of Debtor 2						
	Date August 26, 2022	Date						

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Fill in th	nis information to identi	fy your case:		
Debtor 1	Kathleen N. Reill	y		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	PF PENNSYLVANIA, PHILAD	ELPHIA
Case number (if known)				

# Official Form 106Sum

# **Summary of Your Assets and Liabilities and Certain Statistical Information**

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct

you	r original forms, you must fill out a new Summary and check the box at the top of this page.		
Pa	rt 1: Summarize Your Assets		
			assets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$_	378,725.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$_	14,790.84
	1c. Copy line 63, Total of all property on Schedule A/B	\$	393,515.84
Pa	rt 2: Summarize Your Liabilities		
			liabilities int you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column AAmount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	117,238.72
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e &chedule E/F	\$	21,508.24
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j & chedule E/F	\$_	3,815.60
	Your total liabilities	\$	142,562.56
Pa	rt 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income(Official Form 106I) Copy your combined monthly income from line 12 oSchedule I	\$_	7,971.41
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	4,812.00
Pa	Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?		l. I
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your oth	er sched	aules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a per purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C§ 159.	rsonal, f	amily, or household
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box court with your other schedules.	and su	bmit this form to the

Summary of Your Assets and Liabilities and Certain Statistical Information

Official Form 106Sum

Debtor 1 Reilly, Kathleen N. Case number (if known)

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$\_\_\_\_\_11,742.40

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total cla	aim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	21,508.24
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	21,508.24

Fill in th	is information to identi	fy your case:			
Debtor 1	Kathleen N. Rei	lly			
<b>5</b> 1 4 6	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	EASTERN DISTRICT OF DIVISION	PENNSYLVANIA, PHILADE	_PHIA	
Case number					
(if known)				-	Check if this is an mended filing
Be as complete nformation. If i	t of Financial		e filing together, both are ed	ankruptcy  ually responsible for supply  dditional pages, write your	
Part 1: Give	Details About Your Ma	rital Status and Where You	Lived Before		
I. What is you	ur current marital statu	s?			
■ Marrie □ Not ma					
2. During the	last 3 years, have you	lived anywhere other than w	here you live now?		
■ No □ Yes. Li	ist all of the places you liv	red in the last 3 years. Do not in	nclude where you live now.		
Debtor 1:		Dates Debtor 1 I there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
B. Within the states and territo	last 8 years, did you ev ries include Arizona, Cal	er live with a spouse or lega ifornia, Idaho, Louisiana, Neva	ıl <b>equivalent in a communit</b> ada, New Mexico, Puerto Ric	y property state or territory? o, Texas, Washington and Wi	(Community property sconsin.)
■ No □ Yes. M	lake sure you fill out <i>Sch</i> e	edule H: Your Codebtors (Offic	sial Form 106H).		
Part 2 Expla	ain the Sources of You	r Income			
Fill in the to	tal amount of income yo	nployment or from operating u received from all jobs and al lave income that you receive to	I businesses, including part-t		lar years?
□ No ■ Yes. F	ill in the details.				
		Debtor 1		Debtor 2	
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January the date you fil	1 of current year until ed for bankruptcy:	■ Wages, commissions, bonuses, tips	\$136,825.92	☐ Wages, commissions, bonuses, tips	
		☐ Operating a business		☐ Operating a business	

Debtor 1 Reilly, Kathleen N.		Cas	e number (if known)	
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2021)	■ Wages, commissions, bonuses, tips	\$163,400.00	☐ Wages, commissio bonuses, tips	ns,
	☐ Operating a business		☐ Operating a busine	ss
For the calendar year before that: (January 1 to December 31, 2020)	■ Wages, commissions, bonuses, tips	\$5,603.00	☐ Wages, commissio bonuses, tips	ns,
	Operating a business		☐ Operating a busine	ss
List each source and the gross inco  No Yes. Fill in the details.	me from each source separatel	y. Do not include income that	you listed in line 4.	
Yes. Fill in the details.				
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income (before deductions and exclusions)
For the calendar year before that: (January 1 to December 31, 2020 )	2020 unemployment income	\$6,226.00		
Part 3: List Certain Payments You	Made Before You Filed for E	Sankruntov		
•		• •		
	s debts primarily consumer of the best of 2 has primarily consumer personal, family, or household of the best of t	mer debts. Consumer debts	are defined in 11 U.S.C. §	3 101(8) as "incurred by an
During the 90 days befo	re you filed for bankruptcy, did	you pay any creditor a total of	\$7,575* or more?	
☐ No. Go to line 7		, , , ,		
creditor. Do	each creditor to whom you paid o not include payments for don o an attorney for this bankruptc	nestic support obligations, su		
	on 4/01/25 and every 3 years a		after the date of adjustme	nt.
	r both have primarily consultre you filed for bankruptcy, did		\$600 or more?	
■ No. Go to line 7	7.			
☐ Yes List below €	each creditor to whom you paid or domestic support obligations		, ,	
Creditor's Name and Address	Dates of payme	nt Total amount	Amount you Was	this payment for

still owe

paid

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Case number (if known)

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?  Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.							
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider.</li></ul>							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment			
8.	insider?	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an nsider?  nclude payments on debts guaranteed or cosigned by an insider.						
	<ul><li>■ No</li><li>□ Yes. List all payments to an insider</li></ul>							
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name			
Pa	rt 4: Identify Legal Actions, Repossessions	s, and Foreclosures						
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?  List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.  No  Yes. Fill in the details.							
	Case title Case number	Nature of the case Court or agency			Status of the case			
	Montgomery County Tax Claim Bureay v. Kathleen Reilly 2019-09617	TAX LIEN	Court of Common Pleas, Montgomery County		■ Pending □ On appeal □ Concluded			
	Pennsylvania Department of Revenue v. Kathleen Reilly 2018-63944	lien	Court of Common Pleas, Montgomery County		■ Pending □ On appeal □ Concluded			
	Abington Township v. Kathleen Reilly 2016-14270	LIEN	Court of Common pleas montgomery county		■ Pending □ On appeal □ Concluded			
	United States Internal Revenue v. Kathleen Reilly 2017-70986	IRS Federal Lien	Court of Common Pleas, Montgomery County		■ Pending □ On appeal □ Concluded			
	Internal Revenue Service v. Kathleen Reilly 2018-70989	IRS Federal Lien	Court of Common Pleas, Montgomery County		■ Pending □ On appeal □ Concluded			
	Abington Township v. Kathleen Reilly 2018-26823	municipal lien	Court of Comm Montgomery C		■ Pending □ On appeal			

☐ Concluded

Debtor 1 Reilly, Kathleen N.

Debtor 1 Reilly, Kathleen N. Case number (if known)

Case title Case number	Nature of the case	Court or agency	Status of the o	case
US Internal Revenue Service v.	lien	Court of Common Pleas	, Pending	
Kathleen Reilly		<b>Montgomery County</b>	On appeal	
2017-70946			☐ Concluded	
			Concluded	
Montgomery County Tax Claim	Municipal Lien	Court of Common Pleas	, ■ Pending	
Bureau v. Kathleen Reilly		Montgomery Count	☐ On appeal	
2017-12236			☐ Concluded	
Montgomery County Tax Claim	LIEN	Court of Common Pleas	• ■ Pending	
Bureau v. Kathleen Reilly		Montgomery Count	☐ On appeal	
2018-10560			☐ Concluded	
Pennsylvania Department of	lien	Court of Common Pleas	, Pending	
Revenue v. Kathleen Reilly		Montgomery County	☐ On appeal	
2016-61559			☐ Concluded	
Pennsylvania department of	lien	Court of Common Pleas	, Pending	
Revenue v. Kathleen Reilly		Montgomery Count	☐ On appeal	
2014-61140			☐ Concluded	
Pennsylvania Department of	lien	Court of Common Pleas	, ■ Pending	
Revenue v. Kathleen Reilly		Montgomery Count	☐ On appeal	
2013-61236			☐ Concluded	
Within 1 year before you filed for bankruptcy Check all that apply and fill in the details below  No. Go to line 11.  Yes. Fill in the information below.		erty repossessed, foreclosed, g	arnished, attached, se	ized, or levied?
Creditor Name and Address	Describe the Property		Date	Value of the
Creditor Name and Address			Date	property
	Explain what happened			
Within 90 days before you filed for bankrupt accounts or refuse to make a payment becan No  Yes. Fill in the details.		uding a bank or financial instite	ution, set off any amou	ınts from your
	Describe the action the		Data action was	A
Creditor Name and Address	Describe the action the	e creditor took	Date action was taken	Amount
Within 1 year before you filed for bankruptcy court-appointed receiver, a custodian, or an No		erty in the possession of an ass	ignee for the benefit o	f creditors, a

10.

11.

12.

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Reilly, Kathleen N. Case number (if known)

Deb	otor 1 Reilly, Kathleen N.	Case numbe	er (if known)					
Par	t 5: List Certain Gifts and Contributions							
13.	Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?  No							
	Yes. Fill in the details for each gift.  Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value				
	Person to Whom You Gave the Gift and Address:							
14.	Within 2 years before you filed for bankruptcy ■ No □ Yes. Fill in the details for each gift or contribu	, did you give any gifts or contributions with a tota	al value of more than \$6	600 to any charity?				
	Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	Describe what you contributed	Dates you contributed	Value				
Par	t 6: List Certain Losses							
15.	or gambling?  No Yes. Fill in the details.  Describe the property you lost and how the loss occurred  Include	cribe any insurance coverage for the loss ude the amount that insurance has paid. List pending rance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of property lost				
	t 7: List Certain Payments or Transfers	did you or anyone else acting on your behalf pay o	or transfer any property	v to anyone you				
10.	consulted about seeking bankruptcy or prepa	ring a bankruptcy petition? rs, or credit counseling agencies for services required in		, to unjoine you				
	<ul><li>□ No</li><li>■ Yes. Fill in the details.</li></ul>							
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				
	McCullough Eisenberg 65 W Street Rd Ste A-204 Warminster, PA 18974-3204	0.00		\$2,000.00				
	access counseling	credit counseling	8/16/2022	\$18.95				
17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you lis		or transfer any property	y to anyone who				
	Yes. Fill in the details.							
	Person Who Was Paid Address	Description and value of any property transferred	Date payment or transfer was made	Amount of payment				

18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include

Case 22-12238-mdc Doc 1 Filed 08/26/22 Entered 08/26/22 10:26:22 Document Page 41 of 44 Case number (if known) Debtor 1 Reilly, Kathleen N. gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was Address property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a **beneficiary?** (These are often called asset-protection devices.) ☐ Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. No П Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance before Address (Number, Street, City, State and ZIP account number instrument closed, sold, closing or transfer Code) moved, or transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No П Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State have it? Address (Number, Street, City, State and ZIP Code) and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Name of Storage Facility Do you still Who else has or had access Describe the contents Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Owner's Name Where is the property? Describe the property Value Address (Number, Street, City, State and ZIP Code) (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Case 22-12238-mdc Doc 1 Filed 08/26/22 Entered 08/26/22 10:26:22 Desc Main Document Page 42 of 44 Debtor 1 Reilly, Kathleen N. Case number (if known) own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and know it Address (Number, Street, City, State and ZIP Code) 25. Have you notified any governmental unit of any release of hazardous material? No Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. No Yes. Fill in the details. **Case Title** Nature of the case Status of the Court or agency **Case Number** Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time ☐ A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation ☐ An owner of at least 5% of the voting or equity securities of a corporation □ No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Business Name** Describe the nature of the business **Employer Identification number** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed EIN: PA Real Estate Agent Real Estate Agent-Coldwell **Banker** From-To Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below.

Name

Address

**Date Issued** 

(Number, Street, City, State and ZIP Code)

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Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Νo

☐ Yes. Name of Person ... Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

B2030 (Form 2030) (12/15)

## United States Bankruptcy Court Eastern District of Pennsylvania, Philadelphia Division

In re	Reilly, Kathleen N.		Case No.			
	-	Debtor(s)	Chapter	13		
	DISCLOSURE OF COMP	ENSATION OF ATT	ORNEY FOR D	EBTOR		
С	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 201 compensation paid to me within one year before the filiple rendered on behalf of the debtor(s) in contemplation	ing of the petition in bankrupto	cy, or agreed to be paid	d to me, for services rendered or to		
	For legal services, I have agreed to accept		\$	5,200.00		
	Prior to the filing of this statement I have received	[	\$	2,000.00		
	Balance Due		\$	3,200.00		
2. 1	The source of the compensation paid to me was:					
	☐ Debtor ■ Other (specify):					
3. Т	The source of compensation to be paid to me is:					
	■ Debtor □ Other (specify):					
1. I	I have not agreed to share the above-disclosed comfirm.	pensation with any other person	on unless they are men	nbers and associates of my law		
I	☐ I have agreed to share the above-disclosed compensory of the agreement, together with a list of the national statement.					
5. 1	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:					
b c	<ul> <li>Analysis of the debtor's financial situation, and rend</li> <li>Preparation and filing of any petition, schedules, sta</li> <li>Representation of the debtor at the meeting of credit</li> <li>[Other provisions as needed]</li> </ul>	ntement of affairs and plan whi	ich may be required;			
б. Е	By agreement with the debtor(s), the above-disclosed for	ee does not include the follow	ing service:			
		CERTIFICATION				
	certify that the foregoing is a complete statement of an ankruptcy proceeding.	ny agreement or arrangement i	for payment to me for	representation of the debtor(s) in		
A	ugust 26, 2022	/s/ Carol McCull	ough			
Date		Carol McCullou				
		Signature of Attorn McCullough Eis				
		65 W Street Rd Warminster, PA				
		mccullougheise	enberg@gmail.com			
		Name of law firm				